

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
101586,946

FILING DATE
7-25-06

APPLICANT(S)

4-9-01 CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1					1	
2			1		1	
3					1	
4						
5					1	
6					1	
7					1	
8					1	
9					1	
10					1	
11					1	
12			1		1	
13					1	
14					1	
15					14	
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50						
TOTAL IND.			3		3	
TOTAL DEP.			27		14	
TOTAL CLAIMS			30		17	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						